

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MD</i>		<i>04/04/01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>5-2-01</i>
FORMALITY REVIEW	<i>T. A</i>	<i>DC PM</i>	<i>05/16/01</i>
RESPONSE FORMALITY REVIEW	<i>gms</i>	<i>657</i>	<i>7/23/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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57/23/01